

Approved For Release 2000/09/14 : CIA-RDP81B00879R000500070110-2
SERVICES OTHER THAN PERSONAL

Page 1 of 1

PAID BY

U. S.
(Department, bureau, or establishment)

Voucher prepared at
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No.

To HYCON MFG. COMPANY
(Payee)

PASADENA, CALIFORNIA
(Address) (City) (State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms INVOICE NUMBERS	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		20297				\$ 6,049	23
		20298				43,736	21
		Use continuation sheet(s) if necessary				\$49,785	44

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Shipped from to Weight Government B/L No. Total

I certify that the above bill is correct and just and that payment therefor has not been received.
(Sign original only)

(Payee must NOT use this space)

Differences

Date *Payee
(This certificate not required when a like certificate is made by payee on attached bill or bills)

Account verified; correct for
(Signature or initials)

Per Title
Contract No. FS-99 Date Req. No. Date Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$
FOIAb3b

By [Redacted]

SIGN
ORIGINAL
ONLY

Title
(Contracting Officer)

Date
(12/8/57)

Title
(Approving Officer)
THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (For completion by Administrative Office)

Appropriation, limitation, or project symbol	Appropriation title				Limit'n. or Proj't. Amount	Appropriation Amount
	Allotment symbol	Amount	Obligations liquidated	COST ACCOUNT Symbol Amount	OBJECTIVE CLASSIFICATION Symbol Amount	

Paid by { Check No. dated 19...., for \$ } on Treasurer of the United States in favor of payee named above.
Cash, \$ on 19.... Payee
(Sign original only)

